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DEPARTMENT OF CORRECTION	RELATED NCCHC/ACA STANDARDS: P-E-11/4-4382 (IMPORTANT)	
CHAPTER: 11 HEALTH SERVICES	SUBJECT: NURSING ASSESSMENT PROTOCOLS	
APPROVED BY THE COMMISSIONER:		
EFFECTIVE DATE: 11-19-07		

PURPOSE:

Nursing Protocols/Standing Orders are guidelines approved by the Medical Director, Office of Health Services and Director of Nursing to assist nursing personnel in the care of common inmate health conditions. The care may be education of the inmate in self-care, the initiation of approved over-the-counter medications, the initiation of emergency first-aid care or referral to a primary care health care provider.

POLICY:

1. The Regional Medical Director, Director of Nursing and Office of Health Services will approve all Nursing Protocols prior to implementation. The protocol manual will have a designated page that will be signed by the Regional Medical Director, Office of Health Services and Director of Nursing.
2. This team will review protocols and make needed revisions at least annually.
3. The use of approved over-the-counter (OTC) medications may be utilized in the Nursing Protocols.
4. Emergency Standing Orders will guide the nurse in providing care until the physician or emergency medical system responds. The physician must be contacted each time an emergency protocol is used. Prescription medications must receive telephone or verbal approval and be documented on the Physician Order sheet with a counter-signature within 72 hours.
5. Nurses should refer patients to the physician in accordance with criteria in the Standing Order. This includes immediate referral to the physician, telephone contact with the physician or scheduling the inmate to see the physician or mid-level provider.
6. If an inmate has been seen more than two times with the same complaint and has not seen a physician or mid level provider, he/she will be scheduled to see the physician at the next available physician's sick call.

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7. The nurses will be trained in the use of the approved Nursing Protocols. For the first two weeks a nurse utilizes the protocols, each patient encounter will be reviewed with the nurse by the nursing supervisor or clinician. On a quarterly basis the Director of Nurses will ensure that a designated number of records will be reviewed with each nurse who uses these protocols.
8. The staff will utilize nursing protocol forms for presenting symptoms. When the patient presents with multiple symptoms corresponding to multiple organ systems, a different protocol for each organ symptom must be used. For symptomology that is not covered, a referral will be made to a midlevel or physician. Any prescription medications administered must receive verbal or telephone orders by a practitioner, and will be counter-signed by the practitioner within one (1) business day. When sick call is conducted within the scope of the license by an LPN, the RN nurse on duty must review the encounter within the next shift and if needed, must reassess the patient.
9. OTC medication will be documented in the progress notes of the inmate medical record as part of the P (Plan) and on the inmate's medication administration records.
10. Drug allergies must be carefully reviewed, prior to using OTC medication.
11. The inmate's medical record should be present for review by the nurse when utilizing protocols.
12. Inmate education will be provided according to an approved Inmate Education sheet that follows each Nursing Protocol. The Inmate Education includes pertinent information for self-care and follow-up. It is recommended that the inmate receive a printed copy of the appropriate Inmate Education. Provision of educational materials should be documented in the progress note of the medical record.
13. Pocket size Nursing Assessment Protocol books are given to each nurse by medical management.

References:

National Commission on Correctional Health Care: Standards for Health Services in Prisons, 2003, P-E-11

American Correctional Association: Standards for Adult Correctional Institutions, 4th Edition, 2003. 4-4382